

STATE OF WISCONSIN, CIRCUIT COURT

COUNTY

For Official Use

State of Wisconsin, Plaintiff

-vs-

**Order for  
Validated Risk Assessment**

\_\_\_\_\_, Defendant

Name

Date of Birth

Case No. \_\_\_\_\_

**Defendant's**

Telephone Number

Address

Defendant's Present Location

☐ Interpreter needed

Language: \_\_\_\_\_

**THE COURT FINDS:**

1. The defendant has been convicted after
- ☐
- plea
- ☐
- trial, of the following crime(s):

☐ Copy of Complaint and Information is attached:

Ct.	Crime(s)	Wis. Statute(s) Violated	Date(s) Committed

2. More information is desired to assist in determining whether the court will order the defendant to submit to global positioning system tracking as part of the sentence.

☐ Additional information or concerns, if any: \_\_\_\_\_**THE COURT ORDERS:**

1. A. The Department of Corrections (Department) shall complete a validated risk assessment of the defendant.
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- B. The Department shall deliver the assessment to the court

☐ no later than 30 days after the date of this order [Date] \_\_\_\_\_.☐ [Date] \_\_\_\_\_, which is at least 30 days after the date of this order.

2. The sentencing hearing is scheduled for [Date] \_\_\_\_\_.

☐ 3. Other: \_\_\_\_\_**BY THE COURT:**\_\_\_\_\_  
Circuit Court Judge\_\_\_\_\_  
Name Printed or Typed\_\_\_\_\_  
Date**DISTRIBUTION:**

1. Court – Original;
- 
2. Department of Corrections;
- 
3. District Attorney;
- 
4. Defendant/Counsel